

Beneficiary and Provider Services

IX. BENEFICIARY, CONGRESSIONAL, AND HEALTH BENEFIT ADVISOR RELATIONS

A. General

The contractor's primary responsibilities in a service relations program are to the beneficiaries and the providers. However, in meeting these responsibilities, it is frequently necessary to respond to Congressional Offices or to Health Benefit Advisors (HBAs) who are intervening on behalf of a beneficiary or provider. To facilitate handling of these contacts, contractors should establish a working relationship with the Congressional delegations in each state and with the HBAs in the service area. These individuals can often assist in resolving questions/problems of the beneficiary and provider population.

B. Beneficiary Relations

Contractors will be invited to attend and participate in beneficiary meetings, such as the Retired Military Associations. These meetings provide opportunity for the contractor to make presentations and distribute educational material to the beneficiaries.

C. Congressional and HBA Relations

The contractor is responsible for performance of some minimum functions in carrying out a Congressional and HBA relations programs within the service area of the contract(s). The contractor shall:

1. Establish Communications

Establish and maintain effective communication with the Congressional office staffs and HBAs in the service area(s) of the contract(s). This will include furnishing written notice of the name or names of persons who will serve as point of contact for Congressional Offices and HBAs. The name(s), address(es), and phone number(s) of the contact(s) will be kept current. The contractor shall establish and maintain a telephone line which shall be dedicated to serving congressional and HBA needs. In addition, when it is appropriate because of the volume of Congressional office inquiries received, a contractor representative may need to make a visit to help resolve problems and/or educate the staff about the contractor's TRICARE operations and requirements. In most MTF catchment areas, it is expected that the contractor's health care finder staff will have regular, if not daily, interface with the HBAs. In other areas, the contractor shall develop a program of regular HBA contact which will include a contractor representative meeting with the HBA at least semi-annually. When serious problems or other needs arise, more frequent contact will be required.

2. Bulletins

Furnish copies of the quarterly bulletin discussed in VIII.B.3.c.

3. Reporting

By the thirtieth (30th) day following the close of each contract quarter, the contractor shall submit a summary report only, with the number and the type of contact (Congressional, HBA, etc.) actually completed. The report shall show, for example, one

hundred (100) visits, fifty (50) HBA contacts, etc. The actual visit or contact reports, plus the internal contractor management monitoring reports shall remain a requirement. This report shall be available for **TMA** review at the contractor's office but shall not routinely be sent to the **TMA**. A special report shall be sent to the **TMA** when there is any special accomplishment achieved, special problems encountered or when the contractor's representative receives a recommendation or request from a provider which needs special attention at **TMA**.

D. Special HBA Meetings

TMA conducts workshops with HBAs in various locations throughout the year. Ordinarily the contractor will be required to provide representation to participate in the workshops where HBAs from the contractor's service area will be present in significant numbers. **TMA** will provide at least thirty (30) calendar days notice of such a requirement. **TMA** will also outline the expected nature of contractor's participation. If a contractor has a specific problem or issue which should be addressed at an HBA meeting, **TMA** should be notified at least twenty-one (21) days prior to the scheduled meeting.